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continuously, or, if only used occasionally, within 24 hours after using; and the floors of such building, place, or premises shall be constructed of cement, so as to prevent the blood, foul liquid, or washings from being absorbed. No blood pit, dung pit, offal pit, or privy well shall remain or be constructed within any such place, room, or building; nor shall swine be kept in the same inclosure with a slaughterhouse, nor fed there or elsewhere upon dead animals.

RULE 8. *Inspection of slaughterhouses.*—That county and municipal boards of health be required to inspect or have inspected by their health officer all slaughterhouses and other places where animals are slaughtered for food, and that the requirements of the law and rule 9 be rigidly enforced.

RULE 9. *Sanitary control of public buildings.*—Local boards of health have sanitary control of all public buildings within their jurisdiction. The following is recommended respecting care of the same: All floors and halls not carpeted should be swept with sawdust dampened with a 1 per cent solution of formalin. The common duster should be abolished, and dusting done by removing dust with a dampened cloth. Frequent inspection of all closets, drainage, and ventilation should be made, and where faulty hygienic surroundings are found recommendations in writing for their betterment made to the county board of health and the judge of the district court.

RULE 10. *Public institutions.*—The State board of health shall cause to be made annually a careful sanitary inspection of all places and things in all the public institutions of Kansas, including the State penal and charitable institutions, the State educational institutions, and all other institutions of higher education. A written report of such inspection shall be made to the State board of health and a copy of the same transmitted by the secretary to the institution inspected, together with such recommendations or orders as are made by the board.

MASSACHUSETTS.

Communicable Diseases—Reporting of Cases to State Department of Health by Local Boards of Health. (Ch. 55, Act Mar. 21, 1916.)

SECTION 1. Section 52 of chapter 75 of the Revised Laws, as amended by section 1 of chapter 480 of the acts of the year 1907, is hereby further amended by striking out the words "smallpox, diphtheria, scarlet fever or of any other," in the third line, and inserting in place thereof the word "any"; by striking out the word "board" in the fourth and sixth lines and inserting in place thereof the word "department"; and also by striking out the words "the secretary thereof shall forthwith transmit a copy of such notice to the State board of charity," in the eighth and ninth lines, and inserting in place thereof the words "upon request the State department of health shall forthwith certify any such reports to the State board of charity," so as to read as follows:

SEC. 52. If the board of health of a city or town has had notice of a case of any disease declared by the State department of health to be dangerous to the public health therein, it shall within 24 hours thereafter give notice thereof to the State department of health stating the name and the location of the patient so afflicted, and upon request the State department of health shall forthwith certify any such reports to the State board of charity.

Nonpulmonary Tuberculosis—Investigation by State Department of Health. (Ch. 62, Resolve Apr. 27, 1916.)

Resolved, That the State department of health is hereby authorized and directed to investigate the matter of nonpulmonary tuberculosis with special reference to children and adolescents throughout the Commonwealth. The department shall determine so far as possible—

First. The present number of cases of nonpulmonary tuberculosis in the Commonwealth, and their situation.

Second. The number of hospital beds now available for the care of such cases.

Third. The number of additional hospital beds needed for the proper care and treatment of such cases and the proper situation of such beds.

Fourth. Whether such additional beds, if needed, should be supplied by additions to or enlargements of existing general or other hospitals, or by providing new institutions designed for the purpose of treating nonpulmonary tuberculous cases exclusively.

Fifth. How such additions to or enlargements of general or other hospitals, or such new institutions, if they are needed, should be financed and administered.

The said department may hold such public or private hearings as it may deem proper for the purpose aforesaid, and shall report to the next general court, on or before the second Wednesday in January, with its conclusions and such recommendations and drafts of proposed legislation as it may deem expedient. To carry out the purposes of this resolve the department may expend a sum not exceeding \$500.

Syphilis—Prevention and Suppression of—Appropriation. (Ch. 47, Resolve Apr. 11, 1916.)

Resolved, That there be allowed and paid out of the treasury of the Commonwealth a sum not exceeding \$10,000, to be expended under the direction of the State department of health in purchasing dioxy-diamino-arsenobenzol and its derivatives, or other substances of equal or greater value in the prevention of the transmission of syphilis, or in making investigations as to the practicability of manufacturing, or in manufacturing, the same for free distribution to boards of health, hospitals, dispensaries, and physicians for use within the Commonwealth in the suppression of syphilis in such manner and subject to such rules and regulations as the State department of health shall prescribe.

Tuberculosis—Subsidies to Cities and Towns for Indigent Patients. (Ch. 197, Act May 11, 1916.)

SECTION 1. Chapter 597 of the acts of the year 1911, as amended in section 1 by section 1 of chapter 637 of the acts of the year 1912, and by chapter 57 of the general acts of the year 1916, is hereby further amended by striking out said section 1 and inserting in place thereof the following:

SECTION 1. Every city or town which places its patients suffering from tuberculosis in a municipal or incorporated tuberculosis hospital in this Commonwealth, or in a building or ward set apart for patients suffering from tuberculosis by a municipal or incorporated hospital in this Commonwealth, shall be entitled to receive from the Commonwealth a subsidy of \$5 a week for each patient who is unable to pay for his support, or whose kindred bound by law to maintain him are unable to pay for the same; but a city or town shall not become entitled to this subsidy unless, upon examination authorized by the trustees of hospitals for consumptives, the sputum of such patient be found to contain bacilli of tuberculosis, nor unless the hospital building or ward be approved by said trustees, who shall not give such approval unless they have by authority of law, or by permission of the hospital, full authority to inspect the same at all times. Said trustees may at any time withdraw their approval. In the case of those hospitals having a bed capacity which, in the judgment of the said trustees, is in excess of the number of beds needed for patients exhibiting tubercle bacilli in their sputum, in the localities which these institutions serve, the subsidy above provided for shall be allowed for such patients not exhibiting tubercle bacilli in their sputum as, in the joint opinion of the superintendent of the institution and of the State district health officer of the district in which the hospital is situated, are bona fide cases of consumption and have been in the institution more than 30 days. Said trustees shall not approve claims for subsidy hereunder for more than 30 days prior to the date when notice is mailed to them that a subsidy in any given case is claimed.